

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 MAR -1 AM 11:36

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Missouri Soybean Association Political Action Committee

ADDRESS (number and street)

PO Box 104778



Check if different than previously reported. (ACC)

Jefferson City

MO

65110

4778

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00290866

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



July 31 Mid-Year Report (Non-election Year Only) (MY)



Termination Report (TER)

(b) Monthly Report Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11) (Non-Election Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12) (Non-Election Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

(d) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gary Wheeler

Signature of Treasurer

*Gary Wheeler*

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Missouri Soybean Association Political Action Committee

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		1,174.29
(b) Cash on Hand at Beginning of Reporting Period.....	7,674.29	
(c) Total Receipts (from Line 19).....	7,772.50	15,272.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	15,446.79	16,446.79
7. Total Disbursements (from Line 31).....	13,878.47	14,878.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1,568.32	1,568.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

**Missouri Soybean Association Political Action Committee**

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
12 / 31 / 2015

## **I. Receipts**

### **COLUMN A** Total This Period

### **COLUMN B** Calendar Year-to-Date

**11. Contributions (other than loans) From:**

**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

6,015.00

9,665.00

(ii) Unitemized.....

1,357.50

2,707.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

7,372.50

12,372.50

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

400.00

2,900.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

7,772.50

15,272.50

**12. Transfers From Affiliated/Other Party Committees.....**

0

0

**13. All Loans Received.....**

0

0

**14. Loan Repayments Received.....**

0

0

**15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....**

0

0

**16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....**

0

0

**17. Other Federal Receipts (Dividends, Interest, etc.).....**

0

0

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

**19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶**

7,772.50

15,272.50

**20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶**

7,772.50

15,272.50

## Page 4

**COLUMN B**  
**Calendar Year-to-Date**

- |           |   |
|-----------|---|
|           | 0 |
|           | 0 |
| 688.47    |   |
| 0         |   |
| 0         |   |
| 10,000.00 |   |
| 0         |   |
| 0         |   |
| 0         |   |
| 0         |   |
| 0         |   |
| 4,190.00  |   |
| 0         |   |
| 0         |   |
| 4,190.00  |   |
| 0         |   |
| 0         |   |
| 0         |   |
| 0         |   |
| 14,878.47 |   |
| 14,878.47 |   |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7,772.50	15,272.50
34. Total Contribution Refunds (from Line 28(d)) .....	4,190.00	4,190.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3,582.50	11,082.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	688.47	688.47
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	688.47	688.47

NO POSTING REQUIRED

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thompson Coburn

Mailing Address

One US Bank Plaza

City

St. Louis

State

MO

Zip Code

63101-1693

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼

Fundraising

Aggregate Year-to-Date ▼

2,500.00

Date of Receipt

07 / 06 / 2015

Amount of Each Receipt this Period

2,500.00

☐ Memo Item

Funds were returned.

Full Name (Last, First, Middle Initial)

B. Agriservices of Brunswick, LLC

Mailing Address

PO Box 38

City

Brunswick

State

MO

Zip Code

65236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

07 / 14 / 2015

Amount of Each Receipt this Period

440.00

☐ Memo Item

Funds were returned.

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)

2,940.00

TOTAL This Period (last page this line number only)

2,940.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 3

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

<p><b>A. Flick, Keith</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8964 Audrain Road 104</p> <p>City Centralia State MO Zip Code 65240</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Farmer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Fundraising</p> <p>Aggregate Year-to-Date 500.00</p>		<p>Date of Receipt 07 / 06 / 2015</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Memo Item</p>
<p><b>B. Wright, Matt</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3097 County Road 175</p> <p>City Emden State MO Zip Code 63439</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Farmer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Fundraising</p> <p>Aggregate Year-to-Date 325.00</p>		<p>Date of Receipt 07 / 14 / 2015</p> <p>Amount of Each Receipt this Period 325.00</p> <p><input type="checkbox"/> Memo Item</p>
<p><b>C. Eckels, Mike</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2226 130th Ave.</p> <p>City Murray State IA Zip Code 50174</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Farmer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Fundraising</p> <p>Aggregate Year-to-Date 650.00</p>		<p>Date of Receipt 08 / 11 / 2015</p> <p>Amount of Each Receipt this Period 650.00</p> <p><input type="checkbox"/> Memo Item</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....</p>		1,475.00
<p><b>TOTAL</b> This Period (last page this line number only).....</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 3

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rawlings, David, L

Mailing Address

3580 W. Southern Hills

City

Columbia

State

MO

Zip Code

65203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼

Fundraising

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 31 / 2015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bredehoeft, Neal

Mailing Address

10924 Hwy 23

City

Alma

State

MO

Zip Code

64001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼

Fundraising

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 16 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE **3** OF **3**

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Neisen, Chris

Mailing Address

26643 Highway J

City

Ewing

State

MO

Zip Code

63440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼

Fundraising

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 14 / 2015

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Oerke, Marvin

Mailing Address

Rte 4, Box 688

City

Butler

State

MO

Zip Code

64730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼

Fundraising

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 14 / 2015

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶

850.00

**TOTAL** This Period (last page this line number only).....▶

6 0 1 5 0 0

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 3

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Missouri Cattlemens Association PAC

Mailing Address

2306 Bluff Creek Drive, Suite 100

City

Columbia

State

MO

Zip Code

65201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☒

Other (specify) ▼

Fundraising

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2015

Amount of Each Receipt this Period

400.00

☐ Memo Item

State PAC

Funds are federally permissible.

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

400.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 5

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

A.

Capitol Consulting, LLC

Mailing Address

P.O. Box 931

City

State

Zip Code

Jefferson City

MO

65102

Purpose of Disbursement

Fundraising Consultant

003  
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

568.50

☐ Memo Item

B.

CyberSource/Authorize.Net

Mailing Address

808 E. Utah Valley Dr.

City

State

Zip Code

American Fork

UT

84003

Purpose of Disbursement

Credit card processing set up

001  
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

Amount of Each Disbursement this Period

119.97

☐ Memo Item

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

688.47

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE **1** OF **3**

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Missouri Soybean Association Political Action Committee**

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Disbursement	
<b>Blaine for Congress</b>		MM / DD / YYYY 09 / 11 / 2015	
Mailing Address P.O. Box 98			
City	State	Zip Code	
St. Elizabeth	MO	65075	
Purpose of Disbursement Contribution		011	
Candidate Name Blaine Luetkemeyer		Category/ Type	
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Undesignated	
State: MO	District: 03		
		Amount of Each Disbursement this Period 1,000.00	
		<input type="checkbox"/> Memo Item	

<b>B.</b>		Date of Disbursement	
<b>Ann Wagner for Congress</b>		MM / DD / YYYY 11 / 03 / 2015	
Mailing Address P.O. Box 50			
City	State	Zip Code	
Ballwin	MO	63022	
Purpose of Disbursement Contribution		011	
Candidate Name Ann Wagner		Category/ Type	
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Unspecified	
State: MO	District: 02		
		Amount of Each Disbursement this Period 1,000.00	
		<input type="checkbox"/> Memo Item	

<b>C.</b>		Date of Disbursement	
<b>Billy Long for Congress</b>		MM / DD / YYYY 11 / 23 / 2015	
Mailing Address 3246 E. Ridgeview St.			
City	State	Zip Code	
Springfield	MO	65804-4076	
Purpose of Disbursement Contribution		011	
Candidate Name Billy Long		Category/ Type	
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Unspecified	
State: MO	District: 07		
		Amount of Each Disbursement this Period 500.00	
		<input type="checkbox"/> Memo Item	

**SUBTOTAL** of Disbursements This Page (optional).....▶

2,500.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 3

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Roy Blunt

Date of Disbursement

11 / 24 / 2015

Mailing Address

P.O. Box 10178

City

Columbia

State

MO

Zip Code

65205-4002

Purpose of Disbursement

Contribution

Candidate Name

Roy Blunt

011

Category/  
Type

Amount of Each Disbursement this Period

2,500.00

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify)

Undesignated

State: MO

District:

Full Name (Last, First, Middle Initial)

B. Graves for Congress

Date of Disbursement

11 / 25 / 2015

Mailing Address

2345 Grand Boulevard, Suite 2400

City

Kansas City

State

MO

Zip Code

64108-2642

Purpose of Disbursement

Contribution

Candidate Name

Sam Graves

011

Category/  
Type

Amount of Each Disbursement this Period

1,500.00

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify)

Unspecified

State: MO

District: 06

Full Name (Last, First, Middle Initial)

C. Vicky Hartzler for Congress

Date of Disbursement

11 / 25 / 2015

Mailing Address

P.O. Box 531

City

Harrisonville

State

MO

Zip Code

64701

Purpose of Disbursement

Contribution

Candidate Name

Vicky Hartzler

011

Category/  
Type

Amount of Each Disbursement this Period

1,500.00

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify)

Unspecified

State: MO

District: 04

SUBTOTAL of Disbursements This Page (optional).....▶

5,500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 3

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Missouri Soybean Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jason Smith for Congress

Date of Disbursement

Mailing Address

P.O. Box 1324

12 / 08 / 2015

City Cape Girardeau

State MO

Zip Code 63702-1324

Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

Jason Smith

Category/  
Type

1,000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State: MO

District: 08

Unspecified

B. Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

/ /

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

C. Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

/ /

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

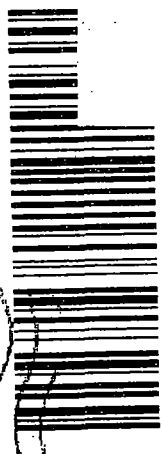
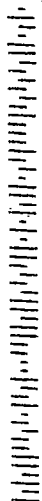
District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1,000.00

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ON CITY, MO 65109



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MID-MISSO  
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WASHINGTON, DC 20463

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PREPARER  
(3/2015)

*JP*

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